

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	1626
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	NOVEL COMPOUNDS FOR MODULATING CELL PROLIFERATION
Attorney Docket Number::	LYMF-P03-007
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	25
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Chaim
Middle Name::	M.
Family Name::	Roifman
City of Residence::	North York
Country of Residence::	Ontario
Street of mailing address::	33 Christine Crescent
City of mailing address::	North York
State or Province of mailing address::	ON

Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M2R 1A4

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Thomas
Family Name:: Grunberger
City of Residence:: Toronto
Country of Residence:: Ontario
Street of mailing address:: 63 Robingrove Road
City of mailing address:: Toronto
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M2R 3A1

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Russian Federation
Status:: Full Capacity
Given Name:: Olga
Family Name:: Rounova
City of Residence:: Toronto
Country of Residence:: Ontario
Street of mailing address:: 414-40 High Park Avenue
City of mailing address:: Toronto
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M6P 2S1

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Russian Federation
Status:: Full Capacity

Given Name:: Demin
Family Name:: Peter
City of Residence:: Toronto
Country of Residence:: Ontario
Street of mailing address:: 414-40 High Park Avenue
City of mailing address:: Toronto
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M6P 2S1

Applicant Authority Type:: Inventor
Primary Citizenship Country:: New Zealand
Status:: Full Capacity
Given Name:: Nigel
Family Name:: Sharfe
City of Residence:: Toronto
Country of Residence:: Ontario
Street of mailing address:: 388 College Street, Floor 2
City of mailing address:: Toronto
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M5T 1S7

Correspondence Information

Correspondence Customer Number:: 28120

Representative Information

Representative Customer Number:: 28120

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/834728	04/12/01
09/834728	An application claiming the benefit under 35 USC 119(e)	60/196936	04/13/01

Assignee Information

Assignee name:: HSC Research and Development Limited
Partnership

Street of mailing address:: Suite 5270
555 University Avenue

City of mailing address:: Toronto

State or Province of mailing address:: ON

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: M5G 1X8